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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/669,197	09/24/2003	Carl J. Skeps	58695US(X)2	2656
32692	7590 07/02/2004		EXAM	INER
	TIVE PROPERTIES	WALLING,	WALLING, MEAGAN S	
PO BOX 33427 ST. PAUL, MN 55133-3427			ART UNIT	PAPER NUMBER
SI. PAUL, M	N 33133-3421		2863	

DATE MAILED: 07/02/2004

Please find below and/or attached an Office communication concerning this application or proceeding.

	Application No.	Applicant(s)				
Intonvious Summans	10/669,197	SKEPS ET AL.				
Interview Summary	Examiner	Art Unit				
	Meagan S Walling	2863				
All participants (applicant, applicant's representative, PT	O personnel):					
(1) Meagan Walling.	(3) <u>Brian Szymanski</u> .					
(2) <u>John Barlow</u> .	(4) Steven Floeder.					
Date of Interview: 30 June 2004.						
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant	2) applicant's representat	tive]				
Exhibit shown or demonstration conducted: d)☐ Yes e)☒ No. If Yes, brief description:						
Claim(s) discussed: 1, 2, 3, and 6.						
Identification of prior art discussed: Eichel et al. (US 6,266,437), Dalmia et al. (US 6,259,109), and Floeder et al. (US 2002/0110269).						
Agreement with respect to the claims f)☐ was reached.	g)☐ was not reached. h)∑	☑ N/A.				
Substance of Interview including description of the gene reached, or any other comments: <u>Applicant described the cited prior art.</u> Specifically it was stated that the Eichel regions from the digital information and analyzing the exarguments will be considered and a thorough review of treceived.	e disclosed invention and disc reference lacked the claimed s tracted regions with at least o	cussed how it differed from the steps of extracting identified ne subsequent algorithm. The				
(A fuller description, if necessary, and a copy of the ame allowable, if available, must be attached. Also, where no allowable is available, a summary thereof must be attach	o copy of the amendments tha	agreed would render the claims at would render the claims				
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE INTERVIEW. (See MPEP Section 713.04). If a reply to 1 GIVEN ONE MONTH FROM THIS INTERVIEW DATE, C FORM, WHICHEVER IS LATER, TO FILE A STATEMEN Summary of Record of Interview requirements on reverse	the last Office action has alrea OR THE MAILING DATE OF T NT OF THE SUBSTANCE OF	ady been filed, APPLICANT IS THIS INTERVIEW SUMMARY				

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required